

N.C. Industrial Commission
Mediation Section
4342 Mail Service Center
Raleigh, NC 27699-4342

I.C. File No(s). _____
Carrier No. _____
_____ County

_____, Plaintiff

v.

_____, Defendant

_____, Carrier

DESIGNATION OF MEDIATOR

Appearances

Plaintiff's Attorney _____ **Telephone** () - _____

Address _____ **Fax** () - _____

Defendant's Attorney _____ **Telephone** () - _____

Address _____ **Fax** () - _____

THIS FORM IS TO BE COMPLETED BY EITHER THE PLAINTIFF OR THE DEFENDANT WITHIN THE TIME SPECIFIED IN THE COMMISSION'S ORDERS AND THE ICMSC RULES.

Pursuant to the Order entered in the above captioned case, referring it to a mediated settlement conference, the parties have selected the mediator named below, who has agreed to serve.

Mediator _____ Telephone () - _____ Fax () - _____

Address _____ -

Street Address/P.O. Box

City

State

ZIP Code

The above named mediator: (check one)

☐

Meets the qualifications set forth in ICMSC Rule 8(b).

☐

Is qualified to mediate this case by reason of the following training and experience

This the ____ day of _____, **200** .

Signature of Plaintiff / Defendant or Representative